



2002

CHIP Enrollee Survey Results and Analysis

Prepared by

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for the

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1.0 EXECUTIVE SUMMARY

MAXIMUS conducts one Montana CHIP enrollee survey annually. In May 2002 MAXIMUS sent out 1,000 surveys to randomly selected Montana CHIP enrollees. The purpose of the survey was to assess the enrollees' satisfaction with the Montana CHIP Program. We compiled the results from 407 completed surveys. The percentages in each measurement are based only on the number of people who answered each specific question. For example, if 100 of the 407 respondents did not answer question number one, but 300 answered "yes" and 7 answered "no" the percentages would be based on 307, not 407.

FINDINGS

- 81% of respondents rated their understanding of the CHIP Program between seven and ten, with ten being "completely understand." This percentage is the same as last year.
- Slightly more respondents (97%) rated their satisfaction with the CHIP Program between seven and ten (ten "completely satisfied") than last years 93%.
- 40% of respondents rated their provider as "the best personal provider possible." Last year the percentage was higher, with 47% saying their provider was the best possible.
- 16% of respondents used the emergency room at least once in the last six-month period.
- 50% of respondents received dental services in the last six-month period. 47% of all respondents rated their dental care as the best possible; an additional 34% rated dental care high with a rating of between seven and nine. While the percentage of respondents who received dental services was similar (53% last year), there were very significant differences in how people rated the quality of their dental care. Last year only three percent said it was the best care possible while 75% gave it a high rating of between seven and nine.
- 29% of respondents had at least one preventive visit in the last six-month period. This is a decrease from last years 36%.
- 96% of respondents (the same as last year) indicated their provider's office staff was usually or always helpful when they called.
- 75% of respondents indicated their provider explained things clearly. Last year this percentage was higher at 80%.
- 81% of respondents have used the Handbook. In addition, 53% used the Dental/Eyeglasses handbook and 45% have used the BlueChip Customer Service Line. Clients were then asked to rate the usefulness of these sources 46% rated the Handbook very useful, while 56% gave the same rating for the Customer Service Line and 44% said the Dental/Eyeglass handbook was very useful (*NOTE: If respondents answered that they did not use the resource they were told to skip over the question regarding the usefulness of the resource. However, on the question regarding the usefulness of the resource, they also had an option to mark "didn't use". Some people who said they did not use the source on the first question still answered the question of the usefulness, and additional people indicated on the second question that they did not use the material.*)

ENROLLEE COMMENTS

- The enrollees who returned surveys this year were as complimentary about the program as the respondents last year.

- *I was very pleased with the CHIP program and SO thankful that they were there when we needed them. My son had to undergo surgery a couple months ago and what a blessing it was for us to have this procedure almost completely paid for. I was very disappointed when we re-applied and were over income because it has been a wonderful insurance for my children, but hope others who financially need it more, will be just as pleased as we were.*
- *I'm so happy to be part of your program! What a wonderful service to provide for children that would otherwise not be able to afford health care. Thanks so much.*
- *We only hope that CHIP will last forever in order to continuously help uninsured children.*
- Again, as they did last year, many respondents commented on what they felt were constrictions with the dental program.
 - *I think that the limit on dental care needs to be higher. My son has not been able to get all the dental work he has needed because of the low limit, otherwise it is a great program.*
 - *Clearer notice for units on dental would be helpful. I didn't realize there was a \$400 limit until it was too late. Great program. Thanks!*
 - *Dental care is the most difficult to find under this health plan.*

CONCLUSIONS

This second survey again reveals that the vast majority of enrollees are very satisfied with the Montana CHIP Program and thankful for the coverage. It also shows that the enrollees tend to use the materials provided by the CHIP program and give a high rating to the usefulness of the materials. The only consistently raised concern was with the dental program. The concern seemed to be two-fold:

- difficulty in finding a dentist who accepts CHIP; and
- too limited of coverage (\$400 annually).

Last year enrollees also expressed concerns about the access to dental care, in the Enrollee Survey Report for 2001 it was recommended that Montana CHIP may want to consider additional education for clients on the dental program. Most of the concerns were in regards to access of dental care and it was suggested that education should focus on the issue that this is a statewide concern, and not a concern specific to CHIP. It is recommended that this education continue.

Another area that may benefit from continued education is preventive care. The survey indicates that even fewer enrollees received preventive care in the period covered by the survey than those that indicated they received preventive care in the last survey.

As mentioned above, enrollees of this program are very pleased that the program exists and overwhelmingly give it high marks. The general comments regarding the program are almost entirely positive, with the exception of the dental issues previously stated.



2.0 INTRODUCTION TO THE STUDY

MAXIMUS is contractually obligated to conduct one CHIP enrollee survey each year. Pursuant to the current agreement MAXIMUS performs one mail-in survey each fiscal year.

MAXIMUS also conducts one mail-in survey for PASSPORT enrollees each year. There are separate PASSPORT survey tools for adults and children. When creating the child survey tool, we worked with the CHIP Quality Assurance Program Officer at the Department of Public Health and Human Services to ensure that one survey tool could be used for both the PASSPORT children and the CHIP children. There were a few changes, but a significant number of the questions are the same on both surveys. This allows for comparisons of some areas of the two programs. The percentages in each measurement are based only on the number of people who answered each specific question. For example, if 100 of the 407 respondents did not answer question number one, but 300 answered “yes” and 7 answered “no” the percentages would be based on 307, not 407.

The intention of this survey is not to use any comparisons to other states. This survey will instead independently measure the Montana CHIP enrollee’s perception of care received by the provider and the Montana CHIP program, as well as measure the use and effectiveness of some of the Montana CHIP materials. In addition, any changes made to this survey from the survey conducted last year were minimal to ensure the ability to trend the results and track any areas of concern as time goes on.



3.0 METHOD OF RESEARCH

3.1 Sample Selection

In May, MAXIMUS mailed out surveys to 1,000 randomly selected current CHIP enrollees. MAXIMUS received a file containing the information on these 1,000 CHIP enrollees from the Department of Public Health and Human Services. The enrollees for the survey were selected randomly taking measures to ensure that only one enrollee per household was selected.

CAHPS suggests that enough surveys be mailed out to ensure that a minimum of 300 surveys are returned. In using a standard sample calculator it was determined that a total of 370 surveys were needed to ensure that we had a margin of error of +/- 5% with a 95% confidence level. For example if 80% of respondents chose ‘Yes’ then we could be 95% sure that 75-85% of the whole population would answer ‘Yes’ to the same question.

3.2 Survey Procedure

In May 2002, we mailed out 1,000 CHIP surveys.

As the surveys were received they were entered as received in a mailing database in Microsoft ACCESS. If surveys were returned due to a bad address, they were marked in the same database as returned. This database was completely separate from the database used to analyze the data to ensure the confidentiality of the responses.

Approximately two weeks later reminders were mailed out to all participants who had not responded and who did not have a bad address in the system.

Again, as the surveys were received they were entered into the mailing database.

We had planned additional follow-up to ensure receipt of an adequate number of surveys but we had received more than the suggested 370 by this point, so no additional follow-up was needed.



4.0 SURVEY RESEARCH FINDINGS



4.1 All About Your Child

Fifty-four percent of returned surveys were for male enrollees and 46% were for female enrollees. When asked how long they had been in the plan, 20% responded that they had been in the plan longer than 24 months, while 45% indicated 12-24 months and 33% indicated six to 12 months. Only two percent have been in the plan for less than six months.

When asked how they would rate their overall health 47% responded 'Excellent'. Only one percent rated their health fair or poor.

This year there were some changes made to the question about race of the child. In addition, a question about ethnicity was added. Five percent of respondents indicated that their ethnicity is Hispanic or Latino while the other 95% indicated it was not Hispanic or Latino. Ninety-four percent indicated that they are white. Eight percent marked American Indian or Alaska Native. Clients were asked to mark one or more race, so some clients who marked "white" also marked "American Indian or Alaska Native."

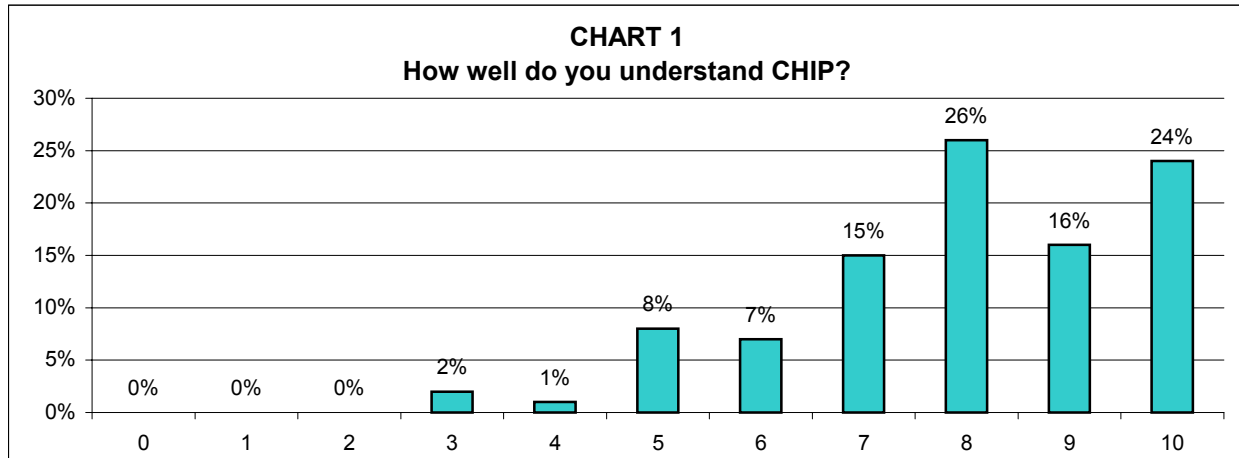
We also asked the age of the respondents. Last year this was a blank field for the clients to fill in this year the age was broken into blocks. Twelve percent indicated that they were two years old or younger, 24% indicated three to six years old, 31% indicated seven to eleven years old, and 33% said they were between 12 and 18 years old.

We asked the person who was filling out the survey to provide us some details about him/herself. Most of those who responded (92%) were female. Forty-five percent were between the ages of 35-44 and 34% were between the ages of 25-34. When asked to indicate the highest level of school they have completed 44% indicated they had some college or a two-year degree. An additional 35% had graduated high school or had a GED. Sixteen percent had more than a two-year degree.

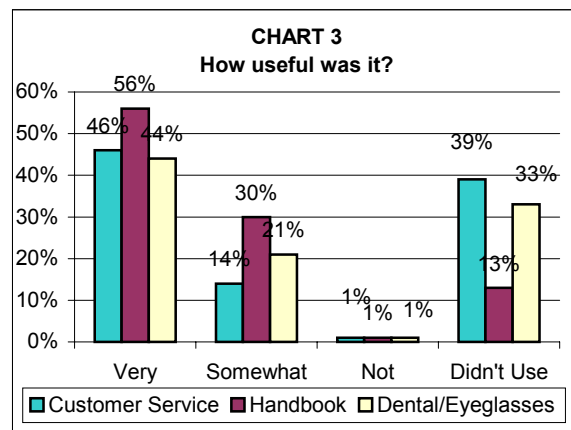
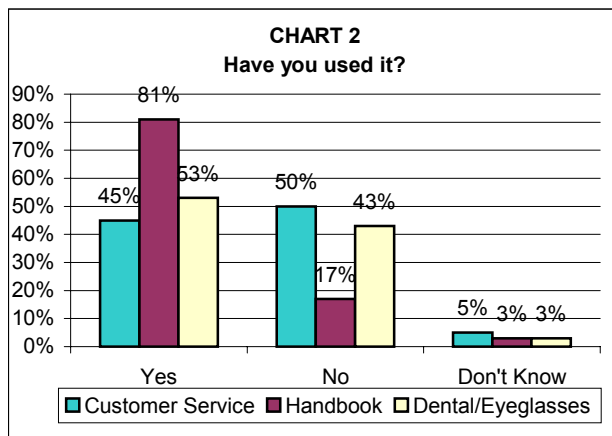


4.2 All About CHIP and Customer Service

We asked enrollees to rate their overall understanding of the CHIP Program (zero to ten, ten being ‘completely understand’). An overwhelming majority of respondents feel they have a good understanding of CHIP. Twenty-four percent of respondents feel they “completely understand” CHIP. Another 57% rated their understanding between seven and nine. Only two percent rated their understanding between zero (do not understand at all) and three. See chart 1 below.

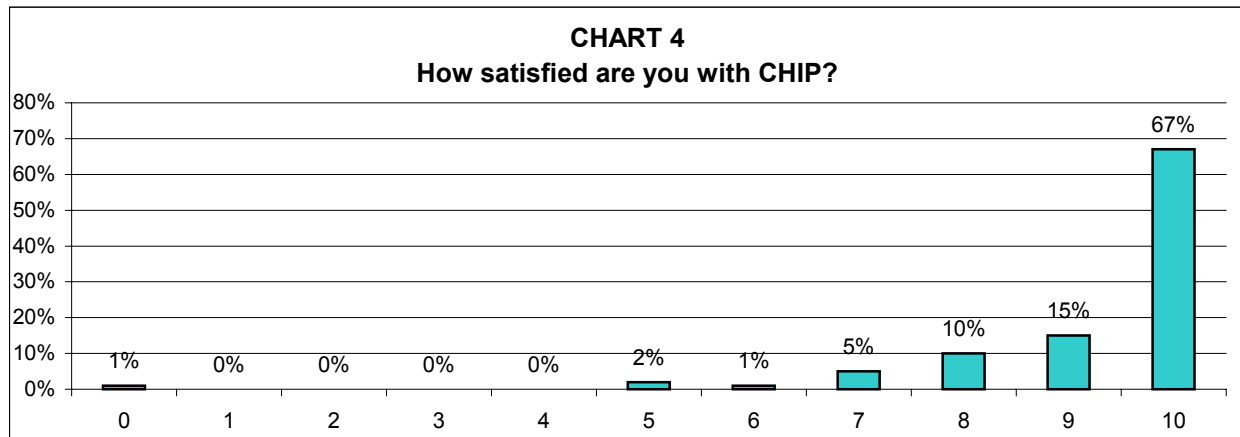


The enrollees were asked if they used the services/materials provided for CHIP and how useful they are. Chart 2 below shows what percentage of enrollees indicated they use each service/material. Most respondents who used the service/material found it either very useful or somewhat useful (*NOTE: respondents were given the option of “don’t use” on the question regarding usefulness also. Some people who did not use the material did not answer the second question. In addition, some people who indicated they used the material in the first question indicated they did not use the material when answering the second question.*). The most used service/material was the BlueCHIP Enrollee Handbook (81%) and the largest percentage of enrollees rated it as either ‘very’ or ‘somewhat’ useful (86%). Chart 3 compares how the enrollees rated each service.



Enrollees were also asked to rate their satisfaction with the CHIP Program. An overwhelming 67% of the respondents indicated that they were completely satisfied with the CHIP Program.

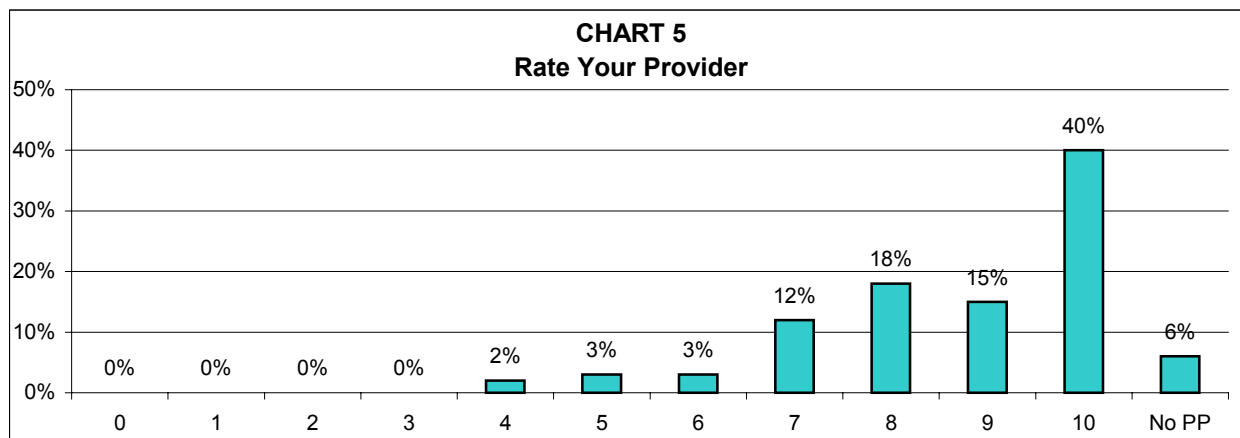
Another 30% rated their satisfaction between seven and nine. Chart 4 shows the respondents satisfaction ratings.



4.3 All About Your Child's Personal Provider

The enrollees were asked how much of a problem it was to get a personal provider with whom they are happy. Seventy-one percent responded that it was not a problem. Only two percent responded that it was a big problem. Approximately a quarter of the respondents (23%) indicated that they did not get a new personal provider.

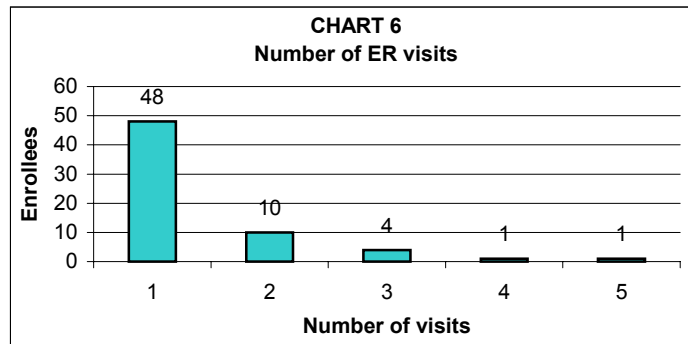
When enrollees were asked to rate their provider from zero to ten, with zero being the worst possible provider and ten being the best possible provider, most enrollees were very pleased with their provider. In fact, 40% rated their provider as the "best personal provider possible." In chart 5 you see how the respondents rated their personal providers.



4.4 All About Your Child's Health Care

Enrollees were asked if their provider's office helped them find another place to go when their personal provider could not see them, 42% said 'Yes'. Of those who said yes, 79% indicated that they were referred to another provider. Five percent of the time the enrollees were referred to the emergency room.

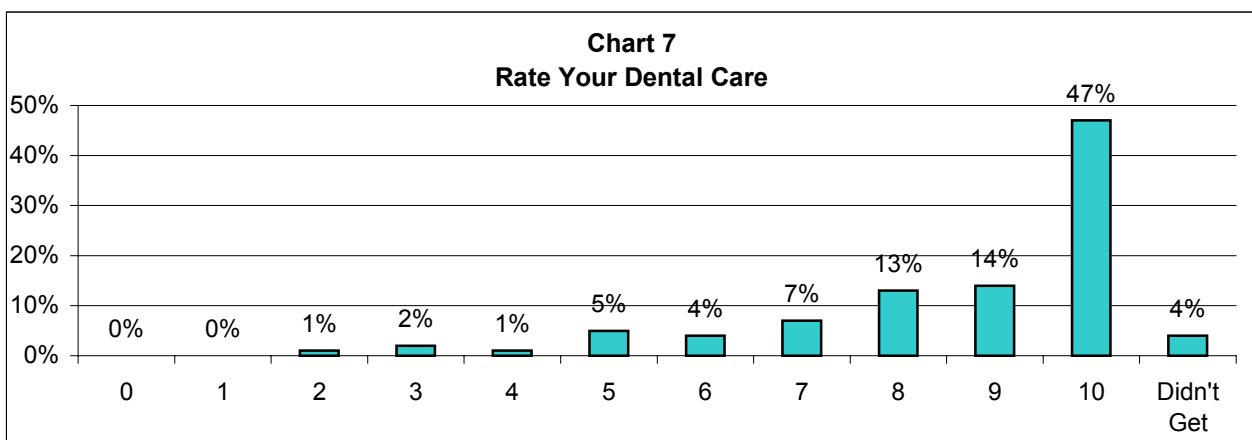
We also asked enrollees to indicate the number of times they used the emergency room in the last six months. This was a blank field for the enrollee to fill in. While the vast majority of enrollees never used the emergency room in the last six months, 16% did use the emergency room during this time frame. Due to the small number of respondents chart 6 shows the real number of enrollees who visited the emergency room rather than the percentage. Those who indicated they did not use the emergency room are not on the chart.



4.5 Getting Dental Care

The enrollees were asked several questions relating to dental care. When asked if they had received any dental care in the last six months, the enrollees were split down the middle, with 50% indicating they had received dental care and 50% indicating they had not. Forty-eight percent of those that indicated they had been to the dentist indicated they had only been once in the last six-months while 21% had been twice and 11% had been to the dentist three times.

Enrollees were asked to rate their dental care, with one being the 'worst possible' and ten being the 'best possible'. Close to half of the respondents (47%) rated it as the best possible dental care. In addition, 34% rated their dental care high with a rating of between seven and nine. Only three percent rated their dental care very low with a rating between zero and three. Chart 7 below shows that only four percent indicated that they did not receive dental care – however, this is four percent of the people who answered this question (201 did not answer the question).



4.6 Getting Preventive Care

One of the advantages of being on a health care plan is receiving preventive care. When we asked enrollees if they had any visits for preventive care in the last six months only 29% said they had at least one visit. It is interesting to note that when we asked

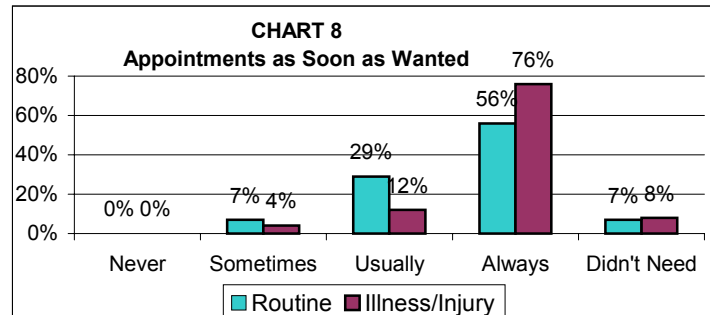
why enrollees had not had a preventive appointment a very significant majority (91%) said they did not have an appointment because they did not need a preventive appointment in the last six months.

On the survey we also asked enrollees who were two years old or younger if they had received any reminders, since the child's birth, to take the child in for a check up. Fifty-two percent had received at least one reminder. The percentage who had actually taken their child in for a preventive appointment since birth (93%) was much larger than those who received the reminder. Eighty-five percent said they got the appointment as quickly as they wanted.



4.7 Getting Care Quickly

An important measure of quality of care is the timeliness of that care. The enrollees were asked several questions relating to the timeliness of receiving the care they needed in the last six months. Chart 8 indicates the timeliness of the visits enrollees received.

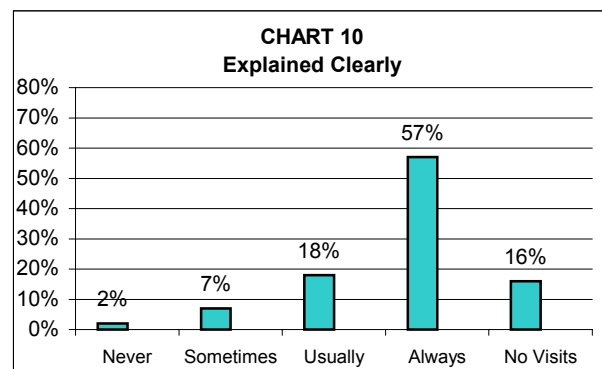
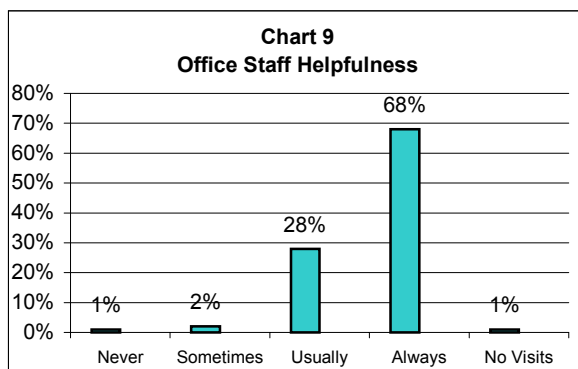


Finally, enrollees were asked how long they had to wait once they arrived at the provider's office for a visit. Fifty-three percent said they waited 15 minutes or less and 37% said they waited 16 to 30 minutes.



4.8 Provider Communication

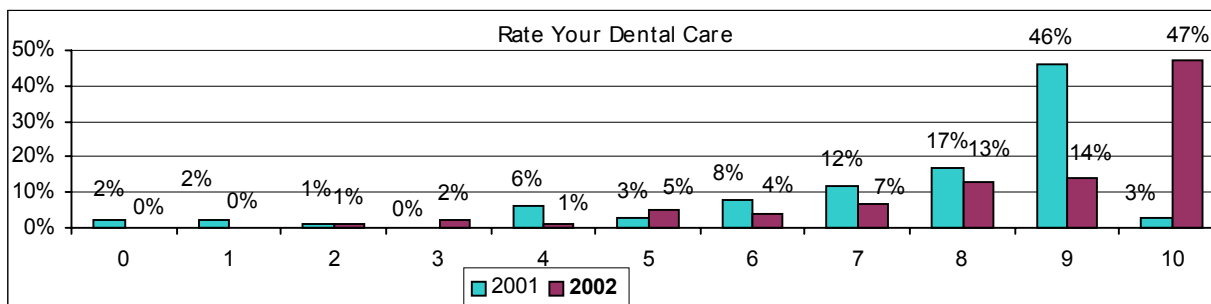
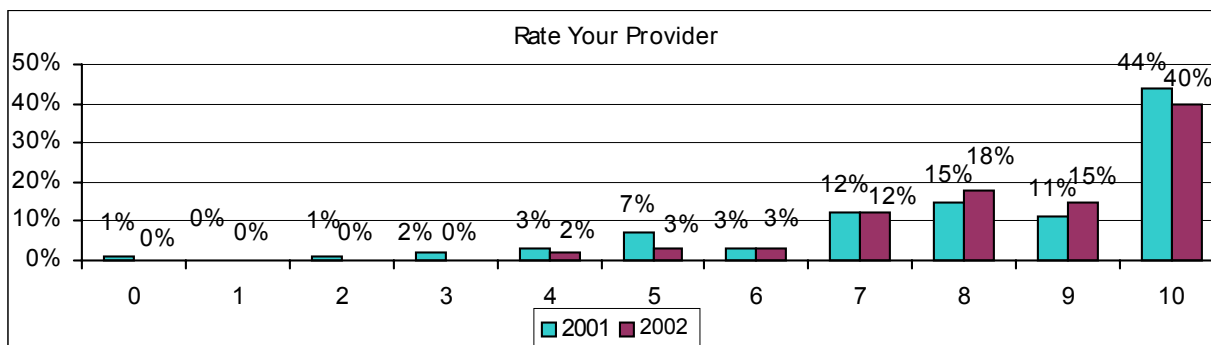
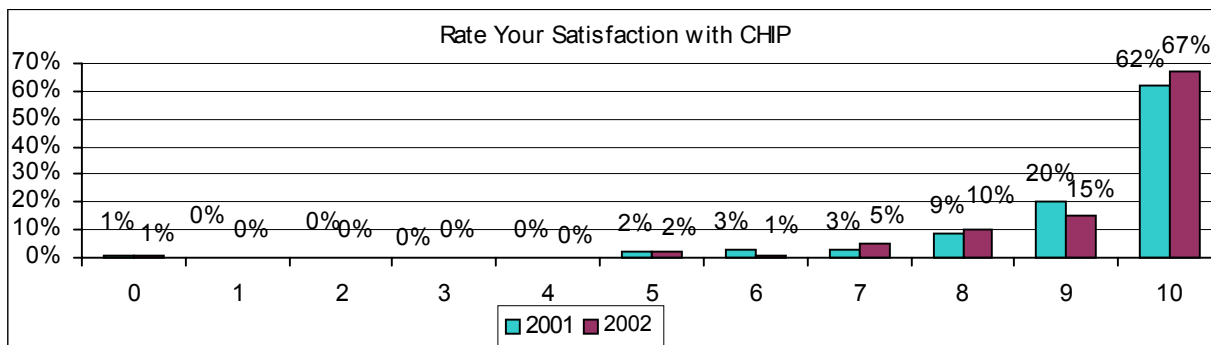
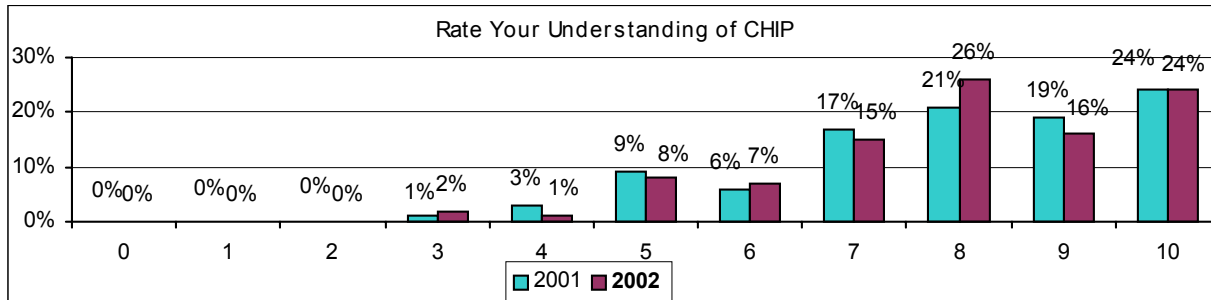
Communication is key in an enrollee's understanding of his or her health and treatment. Good communication may be one of the biggest factors in a patient's compliance, or lack of compliance, to health care recommendations. We asked clients some questions in reference to both the provider and the provider's office staff. We did not specifically ask about communication of the office staff, however, we did ask how often the office staff was helpful. Helpfulness does not always equate with communication, however, a client's perception of helpfulness would relate to their ease in communicating with the office staff. As charts 9 and 10 indicate, most enrollees feel their provider and provider staff communicate well with the enrollee.





5.0 TRENDING

Some findings have been trended below for the last two years. On most questions, while there may be small changes in specific ratings, there are no significant changes in the general ratings (high, medium, low). One of the measurements, however, did have a major change. When ranking their dental care respondents this year were more likely to say it was “the best dental care possible.” However, the percentage who picked seven through ten was similar for both years.





6.0 CONCLUSIONS

6.1 Program

Overall, the respondents to the survey were as pleased with the CHIP program this year as they were last year. This is a program that people appreciate and have high regards for. Last year further education was suggested in the areas of dental services and preventive services. The same recommendations are appropriate this year:

- Dental services – As mentioned above, this year the issues with the dental care seem to be two-fold:

- Access to dentist, and
- The limited annual amount of coverage.

Since the issues with access are a statewide issue and not specific to CHIP, there may not be anything that CHIP can do to influence peoples perception. However, additional education on how to find a dental provider, or some education indicating that this is a statewide problem and not anything specific to the Montana CHIP Program may be beneficial. Following are some of the dental comments:

- *There are not enough dentists available to see CHIP participants. There are too many “closed practices” and those that so severely limit the number they will see.*
- *I wish the dental phase was easier to understand and to use. I don’t feel that my son gets the correct treatment when suggested to a dentist. He has teeth problems that seem to be ignored.*
- *Dental service was not good; the doctor overcharged (went over the \$400 limit). Did not tell the parent when he went over, I am stuck with the bill and make monthly payments. Need better service and communication between CHIP to dentist and dentist to parents.*
- Preventive services – This year the number of clients who had received preventive services within the six-month time frame has decreased from 36% to 29%. While this decrease is not large, education regarding the importance of preventive visits is highly recommended to try to see this percentage rise, not fall, in the future. In addition advertisement of the periodicity schedule should prove to be beneficial.

Appendixes

- A. Survey Question by Question (with percentage of response)
- B. Verbatim Comments
- C. Survey Instrument